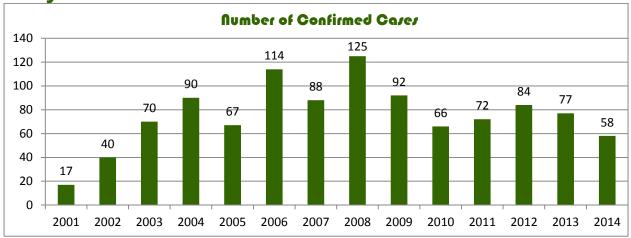
# Michigan State University and Michigan Department of Health and Human Services Occupational Perticide-related

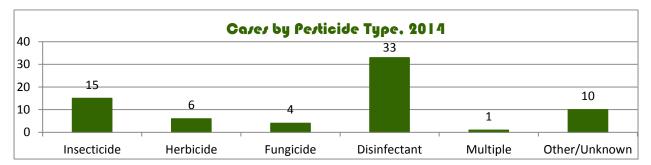
## Illnesses and Injuries in Michigan. 2014

http://www.michigan.gov/mdch/0.4612.7-132-54783\_54784-127397-.00.html

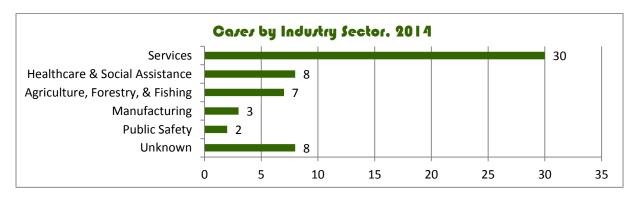
#### Summary Statistics



The number of confirmed work-related pesticide illness and injury cases in Michigan has varied since the surveillance system became fully operational in 2003, ranging from approximately 60 to 125. Overall 55% of the cases are men, but in 2014 52% were women.



<sup>\*</sup>Multiple means one product had more than one type of pesticide. A case could also be exposed to more than one product.

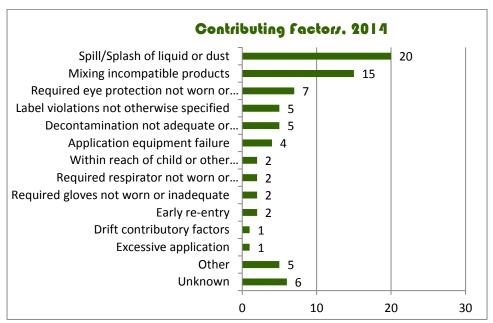


The "Services" sector includes "Services to Buildings and Dwellings", such as structural pest control or landscaping, as well as "Accommodation and Food Services" such as hotels and restaurants, where many disinfectant exposures occurred.

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#### Background

The Michigan Occupational Pesticide-related Illness and Injury surveillance program began in 2001. The goals are to: 1) identify groups at risk for pesticide-related illnesses and injuries, 2) detect trends, 3) identify high-risk active ingredients, 4) identify and refer cases to regulatory agencies as appropriate, and 5) provide information for interventions including education and outreach programs. Pesticide-related Illness and Injury Surveillance is funded under a cooperative agreement with the National Institute for Occupational Safety and Health (NIOSH). A pesticide is any substance or mixture of substances intended to prevent, destroy, repel, or mitigate any pest. The term pesticide can refer to insecticides, herbicides, fungicides, rodenticides, disinfectants, and various other substances. Reported cases are classified based on criteria related to (1) documentation of exposure, (2) documentation of at least two adverse health effects, and (3) evidence supporting a causal relationship between pesticide exposure and health effects. Cases that meet the criteria are considered confirmed cases.



\*Each case could have more than one factor contributing to the exposure.

### 2014 Work-related Perticide Illness and Injury Narratives

- A greenhouse worker moved plants that had recently been sprayed with an organophosphorous insecticide. She did not wear any personal protective equipment. She developed nausea, diarrhea, vomiting, abdominal pain, dizziness and a headache. She went to an emergency department and lost a week of work.
- Chlorine was released at a water park because a valve was closed while the pump was left on. The county
  HazMat team responded and twenty-seven people were taken to the hospital, ten of whom were
  employees. Symptoms included difficulty breathing, cough, congestion, sore throat, chest tightness,
  wheezing, eye irritation, dizziness, headache, nausea, skin irritation, and tachycardia. The incident was
  investigated by MIOSHA.
- A city park manager set off an insecticide fogger in a restroom because it had suddenly become infested with flies. It fell over and she picked it up, inhaling some. She developed a cough that lasted for days, a burning sensation in her throat, chest tightness, difficulty breathing, a headache, and eye irritation. She called poison control. Safety information and integrated pest management information was sent to her to share with her employer. In some product safety ideas she had were sent to the EPA.
- A farmer was in his field while a neighbor was spraying crops with several different herbicides about ¼ mile away. The next day his throat was raw and irritated, he was nauseous, and could not keep any food down. He vomited and had diarrhea. He went to his doctor and called poison control.

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